



HIKE FOR HOPE

Hike to Fight Suicide

Why Should Your Company Support Suicide Prevention Efforts?

We are hopeful that the tide is finally turning, and people feel more comfortable discussing their mental health and how we support others who are struggling. These important conversations are happening at home, in churches, schools, and in the workplace. Society is realizing that our mental health is just as important as our physical health, and it's okay to seek help and treatment. Corporations and businesses are beginning to develop programs and initiatives to support and strengthen employee mental health. Individuals are stepping up to donate money to support the cause. These are all very positive trends, but they are not enough. For us to reduce the suicide deaths in our area, AFSP must raise additional financial support from the corporate sector.

Did you know?

Depression costs employers an estimated \$44 billion each year in lost productivity. Your company can play a key role in addressing depression and mental health conditions. We invite your company to support our efforts. We proudly partner with employers committed to supporting workplace mental health and suicide prevention. As a Walk Sponsor, you will join an elite group of employers focused on Workplace Mental Health and Wellness. It's an investment well worth making.

The American Foundation for Suicide Prevention leads the fight against suicide.

Funds raised from the *Hike for Hope* allow us to fund research, create educational programs, advocate for public policy, and support survivors of suicide loss.

You've come this far, now Join Us!

We ask that you review the opportunities outlined in this Sponsorship packet. We welcome the opportunity to discuss your needs and customize our sponsor levels to meet your company's giving parameters and organizational priorities. We look forward to partnering with you to save lives and bring hope. Together, we will create a culture that is smart about mental health.

For more information, please contact:

David Wessin, VP | Risk Engineering, American Global- Event Chairperson
AFSP, Georgia Chapter
Construction Hike for Hope-Georgia
(786) 566- 1256
David.wessin@americanglobal.com

Enclosures



**American
Foundation
for Suicide
Prevention**

Georgia

CONSTRUCTION HIKE FOR HOPE- GEORGIA SPONSORSHIP LEVELS

Platinum Level Sponsor | Donate \$10,000

Benefits Include:

- Gold, Silver, & Bronze Level Sponsorship Benefits listed below
- 30 complimentary Hike for Hope t-shirts
- Your company listed as sponsor AFSP Georgia's quarterly Chapter Newsletters for 2024- distribution 10,000+
- One onsite presentation at your company's site about AFSP

Gold Level Sponsor | Donate \$5,000

Benefits Include:

- Bronze & Silver Level Sponsorship Benefits listed below
- 20 complimentary Hike for Hope T-shirts
- Your company listed as a sponsor in AFSP Georgia's quarterly Chapter Newsletters for 2024- distribution 10,000+
- Opportunity to include promotional items or company coupons in gift bags
- Your company logo on our event signs as a sponsor

Silver Level Sponsor | Donate \$2,500

Benefits Include:

- Bronze Level Sponsorship Benefits
- Your logo on the back of participant t-shirts
- 10 complimentary Hike for Hope t-shirts

Bronze Level Sponsor | Donate \$1,000

Benefits Include:

- The opportunity to support the nation's leading non-profit organization dedicated to understanding and preventing suicide through research, education and advocacy, and to reaching out to people with mental disorders and those impacted by suicide
- A suicide prevention training for your staff – virtual or in-person
- A tax deductible donation & donation receipt
- Your logo on the back of participant t-shirts
- Your logo on the 2024 Hike for Hope website linking to your company's website
- 5 complimentary Hike for Hope t-shirts



**CONSTRUCTION HIKE FOR HOPE- GEORGIA
2024 SPONSORSHIP AGREEMENT**

Please Print

Name/Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Phone: _____ Email: _____

Company Website Address: _____

Please select one of two sponsorship options:

Cash Sponsorship:

- Platinum Level Sponsor** | Donate \$10,000
- Gold Level Sponsor** | Donate \$5000
- Silver Level Sponsor** | Donate \$2500
- Bronze Level Sponsor** | Donate \$1000

OR

In-Kind Sponsorship:

Product: _____

OR Service: _____

Fair market Value* (product or service): \$ _____

Value Determined by: _____

**min*

Additional Options:

- Call me, I am interested in forming a team for the event
- Unable to sponsor, but please accept this donation\$ _____
- Referred by (if someone referred you to us, please let us know): _____

We authorize The American Foundation for Suicide Prevention to include our corporate name and logo on all event materials consistent with our sponsorship selection and publication dates.

Authorized Signature: _____ Date: _____

View the different options to submit your sponsorship agreement, upload logos, and/or pay online. <https://supporting.afsp.org/index.cfm?fuseaction=cms.page&id=2084>

Completed & Signed Agreement with Logo Due by April 1, 2024.

Logo Specifications: T-shirt: Vector file (EPS, PS, PDF) format to ensure logo integrity. **Website:** Stacked logos appear best (max width is 80px) and we accept vector files and/or image files (.jpeg, .png).

Please scan and email or mail this agreement, logo, & Website link to:

Email: kpetillo@afsp.org | **Mail:** AFSP, 1920 Dresden Drive, #191591, Atlanta GA 31119

CONSTRUCTION HIKE FOR HOPE GEORGIA: IN-KIND GIFT CONFIRMATION

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Event Supporting (City, State) _____

Product Description _____

Fair Market Value (\$ amount/product amount) _____

Value Determined By _____

Donor Company _____

Donor Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____ Email _____

Contact Person _____

Title _____

I, _____, certify that to the best of my knowledge, the information above is true, correct, and complete.

Authorized Signature _____ Date _____

*AFSP must be in receipt of this agreement by 4/1/24, in order to activate on any benefits.

PLEASE SUBMIT THIS AGREEMENT TO:
Kristen Petillo via email: kpetillo@afsp.org

Or, MAIL TO:

The American Foundation for Suicide Prevention
1920 Dresden Drive
#191591
Atlanta, GA 31119
Phone: 404-275-3316 * Email: kpetillo@afsp.org

IRS/Tax Deduction Information:

AFSP will furnish the donor with an acknowledgment letter after the delivery and/or provision of the in-kind gift. This receipt can reflect a dollar value for the in-kind gift as communicated to AFSP by the donor using this form. Any transfer documentation that will help to describe and evaluate the gift in-kind will be appreciated. The donor assumes all other responsibilities relating to the tax deductibility of this contribution. The donor should consult professional advisors regarding any tax reporting requirements.

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. American Foundation for Suicide Prevention</p> <p>2 Business name/disregarded entity name, if different from above</p> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) 1 _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. 199 Water Street, Fl. 11</p> <p>6 City, state, and ZIP code New York, NY 10038</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

<p>Part I Taxpayer Identification Number (TIN)</p> <p>Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i>, later.</p> <p>Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="10" style="text-align: center;">Social security number</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="10" style="text-align: center;">OR</td> </tr> <tr> <td colspan="10" style="text-align: center;">Employer identification number</td> </tr> <tr> <td style="width: 20px; height: 20px;">1</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">-</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">9</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">3</td> <td style="width: 20px; height: 20px;">2</td> <td style="width: 20px; height: 20px;">9</td> </tr> </table>	Social security number																				OR										Employer identification number										1	3	-	3	3	9	3	3	2	9
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<p>Part II Certification</p> <p>Under penalties of perjury, I certify that:</p> <p>1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and</p> <p>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and</p> <p>3. I am a U.S. citizen or other U.S. person (defined below); and</p> <p>4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.</p> <p>Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.</p>	
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Sign Here	Signature of U.S. person ▶	Date ▶ 02/24/2023
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.